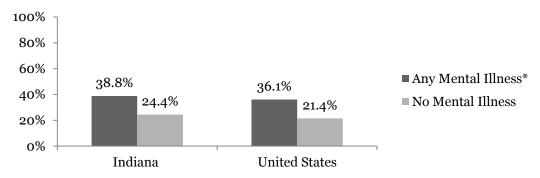
Smoking, Mental Illness, & Substance Use Disorders

Tobacco use is the single most preventable cause of death and disease in the United States, claiming 480,000 lives every year in the U.S.¹ The impact of tobacco on Indiana is staggering, causing approximately 11,100 deaths annually. Smoking prevalence remains significantly higher among individuals with mental illness and substance use disorders. On average, people with serious mental illness die 25 years younger than the general population – often due to conditions caused or exacerbated by tobacco use.²

Current Smoking among Adults with Mental Illness (Indiana and United States)

- About 1 in 5 adults in the U.S. (19.9%) and in Indiana (22.3%) have any mental illness.³
- In both Indiana and the United States, adults with mental illness smoke at much higher rates than adults without mental illness.³
- Individuals with mental illness or substance use disorder smoke nearly 40% of all cigarettes smoked in the United States. 4

Percentage of adults who currently smoke cigarettes, National Survey on Drug Use and Health, 2009-2011⁴



^{*}Mental illness is defined as a diagnosable mental, behavioral, or emotional disorder.

Current Smoking and Other Substance Use

Tobacco use is strongly associated with abuse of other substances such as alcohol and illicit drugs.

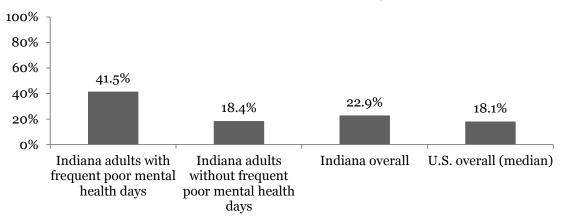
- Among current smokers age 12 or older in the U.S.:
 - 24.1% report illicit drug use compared with 5.4% of nonsmokers⁵
 - 42.9% report binge drinking compared with 17.5% of nonsmokers⁵
 - 15.7% report heavy alcohol use compared with 3.8% of nonsmokers⁵

Indiana's Tobacco Quitline

Poor Mental Health and Current Smoking among Indiana Adults

In addition to higher prevalence of current smoking among adults with a diagnosable mental illness, Indiana adults reporting frequent poor mental health days (at least 14 poor mental health days in the past month) smoke at over 2 times the rate of adults who do not have frequent poor mental health days.

Percentage of adults who currently smoke cigarettes, Behavioral Risk Factor Surveillance System, 2014



Treatment for Tobacco Users with Mental Illness or Substance Use Disorders

Although research shows that tobacco users with mental illness and substance use disorders want to quit and can quit, tobacco treatment may not always be considered a priority in mental health treatment settings.⁶ To help reduce smoking among individuals with mental illness, mental health providers and facilities can:

- Ask about patients' tobacco use, advise them to quit, assess willingness to quit, assist them with accessing effective tobacco treatment, and arrange for follow up
- Integrate tobacco treatment into overall mental health treatment strategies
- Refer patients to an evidence-based tobacco treatment resource for extra support, such as the Indiana Tobacco Quitline 1-800-Quit-Now.
- Implement tobacco-free campus policies in treatment facilities
- Stop practices that encourage tobacco use, such as allowing smoking as a reward

Resources for Quitting Tobacco Use

Quitting tobacco use can greatly improve the health and quality of life of people with mental illness. Tobacco users should contact a health care provider for assistance and call 1-800-Quit-Now or visit www.QuitNowIndiana.com for free, evidence-based support, advice and resources.

Tobacco Prevention and Cessation Commission~ www.in.gov/isdh/tpc ~ 317.234.1787
www.indianaquitline.net

¹ U.S. Department of Health and Human Services. The Health Consequences of Smoking—50 Years of Progress: A Report of the Surgeon General. Atlanta: U.S. Department of Health and Human Services, Centers for Disease Control and Prevention, National Center for Chronic Disease Prevention and Health Promotion, Office on Smoking and Health, 2014.

² National Association of State Mental Health Program Directors. Morbidity and Mortality in People with Serious Mental Illness. Thirteenth in a Series of Technical Reports. Alexandria, VA: 2006.

³ Centers for Disease Control and Prevention. Vital signs: current cigarette smoking among adults aged ≥18 years with mental illness – United States, 2009-2011. MMWR 2013; 62(05): 81-87.

⁴ Substance Abuse and Mental Health Services Administration, Center for Behavioral Health Statistics and Quality. (March 20, 2013). The NSDUH Report Data Spotlight: Adults with Mental Illness or Substance Use Disorder Account for 40 Percent of All Cigarettes Smoked. Rockville, MD.

5 Substance Abuse and Mental Health Services Administration, Results from the 2013 National Survey on Drug Use and Health: Summary of National Findings, NSDUH Series H-48, HHS Publication No. (SMA) 14-4863. Rockville, MD: Substance Abuse and Mental Health Services Administration, 2014.

6 Centers for Disease Control and Prevention. CDC features: smoking among adults with mental illness. Accessed July 21, 2015 from http://www.cdc.gov/features/vitalsigns/SmokingAndMentalIllness/.